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ABSTRACT

This second section of the Guidelines for Establishing Hospital-Based Immunization Education Programs for Mothers of Newborns discusses program implementation in the hospital setting. Brief discussions center on the following topics: (a) Gaining Administrative Approval and Support, (b) Utilizing Hospital Staff and Volunteer Resources (includes the responsibilities of a hospital program coordinator and staff or volunteer program participants), (c) Staff Orientation/Volunteer Training (content, methods, and materials for orientation/training sessions, (d) Visiting New Mothers (an individualized bedside approach to educating new mothers about immunization and record keeping and distributing the recommended schedule and immunization record card, (e) Coordination With State and Local Departments, (f) Evaluating the Program, and (g) Conducting a Public Awareness Campaign. Appendices include a sample hospital form requesting materials for immunization; a sample list of community health service resources in New Jersey; letters given to all new mothers prior to discharge; a parental survey questionnaire with a followup letter to respondents; and a suggested press release. (AS)

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Guidelines for Establishing Hospital-Based Immunization Education Programs for Mothers of Newborns



Section II Program Implementation In the Hospital Setting

PS 015022

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
CENTERS FOR DISEASE CONTROL
ATLANTA, GEORGIA 30333

Section II

Program Implementation In the Hospital Setting

A. GAINING ADMINISTRATIVE APPROVAL AND SUPPORT

"To succeed, a program must have the support and backing of hospital management."² This succinct recommendation from the American Hospital Association cannot be overemphasized. Of equal importance is the commitment of the hospital's staff and volunteer network.

Subsequent to notifying all hospital administrators of program plans (several sample letters are contained in the Appendix), an Immunization Program representative should meet with each hospital administrator; the directors of nursing, obstetrics, and pediatrics; the director of volunteer services; the auxiliary president and other key hospital staff as designated by the administrator to review the materials available for distribution to all new mothers and how they may be obtained, and to discuss the suggested procedures for education and literature distribution. Each hospital should be requested to designate a program coordinator and to order a six-month supply of immunization materials. (Materials and order forms could be supplied by the State health department at no cost to the hospital. A sample order form is contained in the Appendix.) Any specific requests for hospital data collection activities should also be made at this time.

B. UTILIZING HOSPITAL STAFF AND VOLUNTEER RESOURCES

The following hospital personnel are among those most likely to participate in program implementation: Director of Nursing and Postpartum Unit staff; Director of Patient Education (other titles may include the Director of Health Education, In-Service Education or Community Health Education); Director of Volunteer Services; Auxiliary President; and Director of Public or Community Relations. It is extremely important that one person or department assume responsibility for program coordination.

The hospital's Program Coordinator should be responsible for:

1. Establishing and promoting the program within the hospital
2. Determining personnel requirements, number of days per week and most convenient times to offer the program in order to reach all new mothers
3. Recruiting personnel—staff and/or volunteers—to carry out the program
4. Ordering and maintaining an adequate supply of materials
5. Identifying audio-visual resources to augment the training program and to reinforce the personal immunization education provided to new mothers
6. Providing staff orientation and/or volunteer training session(s) as necessary
7. Compiling, or being responsible for the compilation of, data for evaluation (this pertains to each hospital's program evaluation criteria as well as to data collection requested by the health department)
8. Maintaining liaison with health department Immunization Program Staff.

Program Participants (staff and/or volunteers) will be responsible for:

1. Attending orientation/training session(s)
2. Visiting with each new mother to explain the importance of early and complete immunization and the importance of record keeping
3. Distributing the immunization materials to each mother during this visit
4. Completing appropriate log sheets or data collection forms (as required).

C. STAFF ORIENTATION/VOLUNTEER TRAINING

Other hospital staff members and local or State health department staff could be requested to as-

² American Hospital Association, *Immunization Booster Kit*, Chicago: AHA, 1979, p 5.

sist in conducting the orientation/training session(s). Since both nursing staff and/or volunteers will be participating, the following suggestions for program content, methods or materials may need to be modified.

Content

1. Program goals and objectives
2. Roles and responsibilities of participants
3. Review of the following:
 - (a) the seven vaccine-preventable childhood diseases
 - (b) recommended immunization schedule, stressing the importance of the child completing the primary series by two years of age
 - (c) guidelines and materials for immunization education and literature distribution
 - (d) available immunization resources in the community
 - (e) record keeping forms and/or data-collection requirements
4. Liaison and coordination with local and State health departments.
5. Reinforcement and evaluation.

To meet the needs of volunteer participants, a review of interview/counseling techniques and hospital procedures, and an orientation to the Postpartum Unit might also be included. Additional follow-up training sessions subsequent to program implementation should also be considered.

Methods

Active involvement of participants in the learning process will be enhanced through the use of role-playing techniques, pre- and post-session testing as a means for self-evaluation, and by providing adequate time for questions and discussion.

Materials

Audiovisual and written materials could include: film and slide/tape presentations; the immunization pamphlet, official record card and other materials that may be distributed; the "Parents' Guide to Childhood Immunization;" forms and/or data collection sheets that will be utilized; a listing of local immunization services; and a handout summarizing education and distribution procedures. The "Resource List" at the end of these "Guidelines" contains a variety of available materials, including a multimedia training program developed by the New Jersey Hospital Association. Additional immunization materials may be obtained from State and local health departments.

D. VISITING NEW MOTHERS

Guidelines

Postpartum Unit nursing staff will need to identify all mothers to be visited. (This will assure that mothers of stillborns, mothers who have aborted or miscarried, those who are ill or whose infant may be ill, and those who are giving their child up for adoption are *not* visited.) Volunteer program participants will consult with nursing staff to obtain any specific instructions and a listing of mothers to be visited each time they report for duty.

Program participants* will then visit each new mother identified, preferably one a one-to-one basis at bedside, prior to discharge. After greeting the mother and explaining the purpose of the visit, the participant will provide immunization education and review and distribute the materials.

The "immunization education message" shared with each new mother should include:

- the importance of immunization and a brief explanation of the seven vaccine-preventable childhood diseases
- recommended immunization schedule requirements, the necessity to begin immunization at approximately *two months* of age, and the importance of completing the entire series to ensure complete protection
- available sources of immunization in the community
- parents' responsibility for maintaining an accurate, up-to-date immunization record for the infant and other siblings.
- the purpose of the official immunization record card, emphasizing the need to bring it to each physician or clinic visit, and to keep it as proof of the child's immunization status
- immunization requirements for nursery, day-care, and school entry

Suggested Materials

Each mother should receive:

- an immunization pamphlet containing the recommended schedule (one developed specifically for parents of newborns is most effective)
- the State's official immunization record card
- a listing of local immunization resources† (a sample listing is included in the Appendix)
- a "personalized" letter from the hospital (or other source) to serve as an additional take-

*nursing staff and/or volunteers

†Rather than distributing this list, specific information could be recorded on the mother's take-home pamphlets.

home reminder about the importance of immunization and record keeping (several examples are contained in the Appendix)

Augmenting this one-to-one immunization education approach through the use of audio-visual resources is highly recommended. Audio-visual patient education is a rapidly growing component of hospital health education activities. Most hospitals have closed-circuit TV capability in addition to other types of equipment, including small film-strip projectors for use at bedside or with large groups, that could be used for immunization education. Several types of audio-visual immunization education materials are identified in the "Resource List."

This individualized approach to educate all new mothers about the importance of immunization and recordkeeping, coupled with the distribution of the recommended schedule and immunization record card, should result in increased levels of adequately immunized preschoolers and their siblings as well as in increased acceptance of responsibility by parents for maintaining an up-to-date record for each child. Bedside immunization education has the potential to reach 98 percent of all new mothers, and provides an efficient and effective opportunity to introduce the State's official immunization record card at a time when the mother is most concerned about her new infant's health and well-being. Initial distribution of the immunization record card in the hospital setting will supplement providers' distribution procedures and their efforts to reinforce its importance and use at each immunization visit. Coordinated record card distribution by both hospitals and providers should guarantee its availability and its use by all parents.

Additional Suggestions

- Program plans should clearly address the unique and varied needs—including cultural and/or language differences—of the population served by the hospital. Every effort should be made to actively involve all segments of the community in program development and implementation. Recognition of cultural differences affecting health care behavior is as important as translation or editing of appropriate materials in reaching the entire community.
- For those hospitals having an early (24-hour) discharge policy, the nursing staff could give the immunization materials to each mother with a brief explanation, and encourage the mother to contact the hospital or her health care provider for additional information.
- Providing a reminder when the child's first immunization visit is due could serve as an effective "bridge" between the hospital's and

health care provider's responsibility for immunization education. A simple postcard, self-addressed by the mother while still in the hospital, to remind her that the first immunization appointment is due, and reinforcing the importance of record keeping, could then be mailed to her by whomever is performing the followup in the hospital approximately 6 weeks after discharge.

- Offering a small gift to each mother during the immunization education visit has proven to be an effective "ice breaker" in many instances. An article of clothing (such as the 12-month-size tee shirt announcing "I'm Loved; I'm Being Immunized" being provided by the American Red Cross in Greater New York), or other small item is most appropriate. A local business firm, civic group, or voluntary organization may be willing to donate such an item and/or to raise funds for this purpose.

E. COORDINATION WITH STATE AND LOCAL HEALTH DEPARTMENTS

Each hospital should notify its State and/or local health department concerning program plans, and request their assistance. The health department can provide: statistics on immunization levels and disease morbidity; information on current immunization requirements; promotional campaigns, and materials; and assistance in developing a list of local immunization resources and in determining effective program evaluation techniques. Coordination with health department Immunization Program staff is particularly important if the hospital plans to distribute the official immunization record card and/or institute an immunization reminder service for parents.

F. EVALUATING THE PROGRAM

To serve as a basis for program evaluation, *each hospital* will need to develop specific program objectives that clearly state the target audience and the desired results.

Data on the number of mothers who receive education and literature, as compared with the number of live births, could be collected and maintained by the hospital and shared with the health department as requested. To expedite the process, a log book in which to record the data could be kept at the nurses' station on the maternity floor. Suggested column headings for log sheets include: mother's name, infant's date of birth, date visited, interviewer's initials, and "comments." This information should be compiled monthly and/or quarterly and compared with the number of live births for that period.

Ongoing evaluation of the performance of volunteer participants and hours contributed, the effectiveness of procedures and materials, and the program's impact upon the hospital are other important aspects to examine in determining the success of each hospital's program activities.

Evaluating the program's impact on immunization levels and on parents' responsibility for record-keeping is certainly more difficult, but not impossible. Hospitals should consult State and/or local Immunization Program staff to obtain assistance and to coordinate their efforts in this regard.

In Texas, the City of Houston's Department of Public Health has developed a parental survey questionnaire that is being used to evaluate the impact of immunization education programs conducted in Houston-area hospitals. Samples of their questionnaire and follow-up letter to respondents are contained in the Appendix. Hospitals

and/or health departments might consider a similar approach.

G. PUBLIC AWARENESS CAMPAIGN

Informing other hospital staff and the community about program plans and activities is an important aspect to be considered. In addition to alerting an expectant mother to anticipate an "immunization education visit" during her hospital stay, these program-related announcements could also be used to reinforce the importance of early and complete immunization, record keeping and the location of immunization resources. The hospital's employee or community newsletter, press releases and newspaper feature articles are only a few examples of suitable methods. The hospital's director of public relations or other appropriate staff member could be requested to provide advice and assistance.

Appendix to Section II
Program Implementation
In the Hospital Setting



NEW JERSEY HOSPITAL ASSOCIATION

at the Center for Health Affairs 746-760 Alexander Road CN 1 Princeton, New Jersey 08540 (609) 452-9280

DATE: September 5, 1980
TO: Chief Executive Officers
New Jersey Health Care Institutions
FROM: Jack W. Owen, President
New Jersey Hospital Association

Recent studies at state and national levels demonstrate conclusively that preschool-age children are inadequately immunized against the preventable childhood diseases (measles, mumps, rubella, tetanus, pertussis, polio, and diphtheria).

Of particular concern to health officials is the compliance levels of children born to the high-risk mother. A need exists, therefore, to educate parents early in their child's life about the importance of immunization and to develop a mechanism which will increase the compliance levels of children born to the high-risk mother.

To meet this need, the New Jersey Hospital Association, in cooperation with the State Department of Health, has designed a bedside immunization education and follow-up program for implementation in New Jersey hospitals.

Your participation in this project will assist us in piloting this model program and will contribute to the statewide effort to raise the immunization levels of our children.

The Childhood Immunization Education and Follow-Up Program for New Parents is a fine example of cost containment and health promotion efforts in that immunization eliminates unnecessary illness, death and the resulting hospital costs.

The New Jersey Hospital Association looks forward to working with you on this important project.

ALD/tjp



Working For Your Health

June 15, 1980

TO: All Administrators

FROM: Arvid B. Brekke
Leda Reed, President CAHA

SUBJECT: Early Childhood Immunization Program

Recent studies at state and national levels demonstrate conclusively that children are inadequately immunized against preventable childhood diseases. Of particular concern to health officials are children born to mothers who may fail to get them immunized. A need exists, therefore, to educate parents early in their child's life about the importance of immunization and to develop a mechanism which will increase the number of children immunized.

To meet this need by age two the Colorado Association of Hospital Auxiliaries, the Colorado Department of Health and the Colorado Hospital Association, has designed a bedside immunization education and follow-up program for implementation in Colorado hospitals.

Your cooperation in identifying a person in your hospital to coordinate this program will be appreciated. Consider the Director of Nursing or the Director of Volunteer Services to work with you in selecting this person. Your coordinator should contact Jan Ancell at the Colorado Hospital Association by July 1, 1980. Duties of the coordinator are outlined on page 2 in the attached guidelines.

The Colorado Department of Health will provide required materials and aid in the training of the coordinators. The Early Childhood Immunization Program is a fine example of cost containment and health promotion efforts in that immunization eliminates unnecessary illness and the resulting hospital costs. Similar programs have been successful in other states.

The Colorado Association of Hospital Auxiliaries, the Colorado Department of Health and the Colorado Hospital Association look forward to working with you on this important project.

Colorado Hospital Association, 2140 South Holly, Denver, Colorado 80222 (303) 758-1630

SAMPLE HOSPITAL ORDER FORM

Request for Immunization Materials

_____(State)

In-Hospital Immunization Education/Information Distribution Program For Mothers of Newborns

The _____ Department of Health Immunization Program, in co-operation with hospitals throughout the state, will send each hospital a supply of immunization education materials to distribute to all new mothers prior to discharge. The following materials will be supplied free of charge on a semi-annual basis:

- Official State Immunization Record Card
- Immunization pamphlet containing recommended schedule
- (other materials as appropriate)

Your hospital may also wish to provide each new mother with a letter in addition to the above materials, as a personal reminder about the importance of immunization and record keeping (samples attached).

All materials will be sent to the hospital's *designated coordinator* for this program as listed below:

NAME: _____

TITLE: _____

HOSPITAL: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: (Area code) (_____) _____

REQUEST _____ COPIES FOR A SIX-MONTH SUPPLY

SIGNED: _____

DATE: _____

Please return the form to:

_____ State Department of Health
Immunization Program
(complete mailing address)

If you have any questions, please contact the Immunization Program at (area code/tel. number).

SAMPLE LIST OF COMMUNITY HEALTH SERVICE RESOURCES
RARITAN BAY HEALTH SERVICES CORPORATION - CONSUMER HEALTH EDUCATION DEPARTMENT
Infant Safety Care Seat/Immunization Program
HEALTH CARE FACILITIES - IMMUNIZATION SCHEDULES

HEALTH CARE FACILITY	CATEGORY	CLINIC SCHEDULES	CONTACT
Carteret Health Department 216 Pershing Avenue Carteret, NJ 07008	-Infant, Pre-School Age -School Age	-2nd Wednesday of each month; 9:30-11:30 AM; By Appointment Only. -3rd Tuesday of each month; 4 clinics are scheduled each year; parents contacted through school nurse; By Appointment Only.	541-7533
Edison Health Center 80 Idlewild Rd. Edison, NJ 08817	-Infant, Pre-School Age -School Age	-1st Monday of each month; 9:00-11:00 AM; No appointment Necessary. -3rd Tuesday of each month. Edison Division of Health's Trailer is located at Kilmer Plaza or A & P Shopping Center.	287-0900 Call for location.
Matawan Boro Health Department 145 Broad St. Matawan, NJ 07747 (serves: Keyport, Matawan Boro, Madison Township & Keensburg)	-Infant, Pre-School Age -Pre-School (4 years old) & School Age	-Required to participate in Child Health Clinic to obtain immunization-aiding fee scale; By Appointment Only. -3rd Monday of each month: 8:30-9:30 AM; By Appointment Only.	747-7600 MCOSS-Nursing Service Given at Matawan Boro of Health. ----- 566-0740
Old Bridge Department of Health 1 Old Bridge Plaza Old Bridge, NJ 08857	-Infant, Pre-School and School Age	-1st Friday of each month; 9:00-11:30 AM. (and) -3rd Wednesday of each month; 1:00-3:00 PM. By Appointment Only.	Call Middlesex County VNA to make appointment 821-9500; however, immunizations are given at the Old Bridge Dept. of Health
Perth Amboy Health Department 133 New Brunswick Ave. Perth Amboy, NJ 08861	-Infant, Pre-School Age -School Age.	-2nd Thursday of each month; 8:30-11:30 AM; No Appointment Required. -Every Wednesday; 3:30-4:30 PM; No Appointment Required.	826-0290, Ext. 44
Woodbridge Division of Health 2 George Frederick Plaza Woodbridge, NJ 07095	-Infant, Pre-School Age -School Age	-2nd and 4th Wednesday of each month; 9:00 AM-12 Noon & 2:00-5:00 PM; By Appointment Only. (Newborn child must be seen by a physician before first immunization can be given.) -1st Thursday of each month; 9:30-11:00 AM; No appointment Necessary.	634-4500, Ext. 208

nad

3/80

Source: Perth Amboy General Hospital, Perth Amboy, New Jersey.

FREE Immunizations, unless otherwise stated.

**SUGGESTED LETTER TO BE GIVEN TO ALL NEW MOTHERS PRIOR TO
DISCHARGE IN ADDITION TO THE IMMUNIZATION RECORD CARD AND PAMPHLET**

(Hospital Letterhead)



Dear Parent:

Congratulations on the birth of your baby!

We know that you want your baby to enjoy good health and be well protected against disease. A series of *immunizations* will protect your baby against the following diseases: diphtheria, tetanus, pertussis (whooping cough), polio, measles, mumps and rubella. Your baby should begin the immunization series against diphtheria, tetanus, pertussis (DTP) and polio at approximately *two months* of age. The entire series of immunizations must be completed to fully protect your baby.

Immunizations are available from your doctor or child health clinic. We urge you to see your doctor or child health clinic regularly to complete these immunizations.

The hospital has provided you with an official Immunization Record Card and a pamphlet containing the recommended immunization schedule. Be sure to bring the Immunization Record card with you each time you visit your doctor or clinic so that each immunization given can be recorded.

Immunizations are required by law for nursery, day care and school entry. This Record, if kept up-to-date will serve as proof that your child has received all the immunizations needed.

If you would like more information about immunization, please contact your doctor or local health department.

Good health to you and your new baby!

Department and/or person responsible for
Immunization Education Program



This letter is given to mothers in
the hospital with newborn babies

STATE OF MISSISSIPPI

OFFICE OF THE GOVERNOR

JACKSON, MISSISSIPPI 39205

WILLIAM F. WINTER
GOVERNOR

Dear Parents:

Congratulations on your new baby!

I am convinced that the children of the State of Mississippi are the most important assets that we have for the future. Because of my interest in children I want to urge you to begin childhood immunizations (baby shots) on schedule. I want your child to be healthy now and continue to be healthy throughout life.

The childhood diseases of

POLIO

DIPHTHERIA

WHOOPING COUGH

AND TETANUS

will never happen to your precious baby if the immunizations are given
ON SCHEDULE.

MEASLES

MUMPS

RUBELLA

vaccines are given when your
child is 15 months of age.

Let me encourage you to take your baby to your doctor or health
department ON SCHEDULE to insure the future health of your child.

With best wishes, I am

Sincerely,

WILLIAM F. WINTER
Governor

WFW:trm

PARENTAL SURVEY QUESTIONNAIRE*



City of
HOUSTON

JIM McCONN, MAYOR

HOUSTON, TEXAS 77030

CITY COUNCIL MEMBERS

LARRY MCKASKLE
ERNEST MCGOWEN, SR.
LANCE LALOR
ANTHONY W. HALL, JR.
FRANK O. MANCUSO
JOHN G. GOODNER
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BEN T. REYES
JIM WESTMORELAND
ELEANOR TINSLEY
JOHNNY GOYEN
HOMER L. FORD
JUDSON ROBINSON, JR.

CITY CONTROLLER

KATHRYN J. WHITMIRE

City of Houston Health Department

1115 North MacGregor Drive

Dear Parent:

The City of Houston Health Department would like to ask you a few questions about _____ born March _____, 1977. Your child is one of 295 that we have randomly selected, therefore, your answers are very important to us.

The questions are about your child's immunizations (shots) and the immunization literature you should have received in the hospital. Your answers to the questions will be confidential and no person can be identified. Your answers will help us plan better health programs for the City of Houston's pre-school children.

Please take time now to answer the questions shown on the lower portion of this letter. Detach and return it to us in the enclosed envelope. No postage is necessary.

We appreciate your help. If you have any questions, please call me at 222-4291.

Sincerely,

Ardath Payne, Dr. P.H., Chief
Immunization Program

-
1. Did you receive the health department immunization literature distributed at your hospital?
Yes _____ No _____
 2. Have you started your child's immunizations (shots)? Yes _____ No _____
 3. If you received the immunization literature at the hospital, did you find it to be informative and helpful?
Yes _____ No _____
 4. Do you have any suggestions for improving this service?

*An "immunization information" packet has been distributed to new mothers in Houston area hospitals since January, 1977. According to Ardath Payne, Dr. P.H., Administrator of Preventive Medical Services for the Houston City Health Department: "the packet includes a letter of congratulation and pamphlet on immunizations and is included in the vital statistics envelope. This is an inexpensive way to reach 30,000 births and has been successful. In the latter part of 1977, we evaluated this method by randomly selecting 295 children and mailing a questionnaire to their parents (as above). Of the parents responding, 62% received the packet and 59% found the information to be helpful. The percentage of children starting immunizations (96%) was most encouraging."

FOLLOWUP LETTER TO RESPONDENTS



City of HOUSTON

JIM McCONN, MAYOR
HOUSTON, TEXAS 77030

CITY COUNCIL MEMBERS

LARRY MCKASKLE
ERNEST MCGOWEN, SR.
LANCE LALOR
ANTHONY W. HALL, JR.
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ELEANOR TINSLEY
JOHNNY GOYEN
HOMER L. FORD
JUDSON ROBINSON, JR.

CITY CONTROLLER

KATHRYN J. WHITMIRE

City of Houston Health Department
1115 North MacGregor Drive

Dear Parent:

A few weeks ago you kindly completed an immunization questionnaire for us. Mothers should be receiving an "immunization information" packet for her newborn at the hospital. Your response has helped tremendously in evaluation of a health education technique. Based upon your responses, we are re-evaluating the current system and revising the distribution in order to reach more mothers.

A summary of results is as follows:

1. Did you receive the health department immunization literature distributed at your hospital?

<u>62%</u>	<u>36%</u>	<u>2%</u>
Yes	No	Unknown

2. Have you started your child's immunizations?

<u>96%</u>	<u>4%</u>
Yes	No

3. If you received the immunization literature at the hospital, did you find it to be informative and helpful?

<u>59%</u>	<u>8%</u>	<u>33%</u>
Yes	No	Unknown

Number in survey - 290
Number responding - 113
Number returned by Post Office - 33
No response - 146

If you did not receive the information, a schedule of immunizations and pamphlet are enclosed. Our primary objective is to prevent outbreaks of childhood diseases by immunizing children. Immunizations can be received either from private physicians or any health department clinic.

Thank you again for taking the time to respond to the questionnaire. This sample survey has established a need for revision of one of our program elements and will help us reach our objective of prevention of childhood disease outbreaks.

Sincerely,

15

Ardath Payne, Dr. P.H., Chief
Immunization Program

AP:jd

SUGGESTED PRESS RELEASE*

(Name of Organization) announces program on childhood disease prevention.

The (local hospital association auxiliary), in cooperation with the South Dakota Department of Health, will be conducting a program aimed at encouraging early immunization of all newborns. Local activities of the auxiliary will include distribution of information about immunizations and availability of local immunization services to the parents of newborns through the (local hospital). The (local auxiliary), as a reminder, will then notify the parents at a time when immunization should have been started.

To give a child a healthy start in life, parents are encouraged to establish a pattern of visits to a physician shortly after the child is born and should be particularly careful to see that routine vaccinations are completed on time.

Vaccinations against disease should begin at about two months of age, with the first dose of combination vaccine for diphtheria, tetanus, and pertussis (whooping cough). Polio vaccination at about the same time, and both of these vaccines are repeated at specified intervals during the first year and a half of life, and then are repeated once again when the child is ready for school.

At age 15 months the child should be vaccinated for measles, mumps, and rubella (German measles). These three vaccines, which may be given separately on different office visits or most commonly at one time in a combination vaccine, together with those already mentioned, complete the child's immunization against 7 diseases that historically have caused disability and death in large numbers of children and still strike some of those who remain unprotected.

For more information about this or other immunization program related activities, call (name of local agency official, telephone number) or the South Dakota Department of Health at TIE-LINE (1-800-592-1865).

*Source: South Dakota Department of Health.

**Give your child
the chance for a
whole, good life.**



**Immunize him.
Immunize her.
Please.**